



**PACIFIC REGIONAL MEDICAL COMMAND
INSPECTOR GENERAL**

**Inspection of Facilities Used to House
Warriors in Transition**

19-26 October 2009

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Executive Summary

1. Background. On 18 September 2007, the Deputy Secretary of Defense (DEPSECDEF) promulgated standards to be used across the Department of Defense (DoD) when inspecting facilities housing Warriors in Transition (WT). These standards focus in the areas of assignment, baseline accommodations, and special medical requirements. On 28 January 2008, Public Law 110-181, Section 1662, *Access of Recovering Service Members to Adequate Outpatient Residential Facilities*, was enacted requiring Regional Medical Command (RMC) Inspectors General (IGs) to conduct semi-annual inspections of all WT housing for the first two years and annually thereafter. There was no special interest item requirement during this fourth semi-annual inspection of WT housing facilities. The Pacific Regional Medical Command Inspector General (PRMC IG) led the team of PRMC inspectors to include a subject matter expert from Safety. The results of this inspection will be provided to the Congressional Defense Committees, the Assistant Secretary of Defense for Health Affairs, the Department of Defense Agencies, the Secretary of the Army, the Installation Management Command-Pacific (IMCOM-PAC), the Office of The Surgeon General (OTSG)/US Army Medical Command (USA MEDCOM), the Senior Commander, and the Pacific Regional Medical Command (PRMC) Commander. Finally, the final inspection report will be posted on the respective RMC Internet website. The Commanding General (CG), USA MEDCOM, 25 August 2009 memorandum directed Commanders of RMCs to issue a directive to their IGs to conduct the "Special Inspection of Facilities Used to House Recovering Service Members." On 28 August 2009, the PRMC CG issued the directive to PRMC IG to conduct and evaluate the standards of the facilities used to house WT at the RMC, Hawaii. On 19-26 October 2009, the PRMC IG inspection team completed its fourth semi-annual inspection of WT barracks, lodging facilities, and all the government-owned or leased housing units used by WT in Oahu.

2. Purpose. The purpose of this inspection was to assess the condition and adequacy of armed forces facilities used to house recovering service members assigned to Warrior Transition Units (WTUs).

3. Concept. The concept of this inspection was to determine the effectiveness of the Armed Forces Housing Facilities for WT using the baseline standards as outlined in DEPSECDEF 18 September 2007 memorandum in the proper housing of WT personnel and report on the adequacy of those facilities in the PRMC and tenant units.

4. Objectives.

a. Assess compliance with WT housing assignments as outlined in Memorandum, DEPSECDEF, 18 Sep 07, Subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel.

b. Assess WT occupied housing for compliance with baseline standards as outlined in Memorandum, DEPSECDEF, 18 Sep 07, Subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel.

[REDACTED]

c. Assess compliance with the requirement to provide special accommodations and services to WT with functional limitations as outlined in Memorandum, DEPSECDEF, 18 Sep 07, Subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel.

5. Special Interest Item. None.

6. Summary of Findings, Observations, and Recommendations. The inspection team inspected three different types of facilities (barracks, lodging, government-owned housing/contracted or leased housing and privatized family housing or lodging) with results of three findings and nine observations. There were no WT personnel residing in Fort Shafter and Tripler Lodging.

a. Findings: There were three findings. The first finding is related to some missing fire sprinkler head metal rings in the laundry facility. There were three vacant rooms or 1.5% out of 200 individual rooms had a missing fire sprinkler head metal rings. Another finding was related to few rooms with inoperable, tampered with, or missing smoke alarm detectors. This type of finding was similar and was noted during the last three semi-annual inspections. There were no findings relating to room or housing assignment but there were few comments (noise from range and pending move to newer housing) from the WT personnel residing in WTB barracks and in government-owned or leased housing units. Ninety one percent (91%) or 150 out of 164 WTs inspected housing met the DoD housing standards and 14 or 9% require some minor repairs in their room or housing unit in order to meet the DoD housing baseline standards.

b. Observations: There were nine observations based on the three objectives that were applied. Most of the rooms in the barracks were clean, neat and tidy. There were approximately 3% out of 108 assigned WT personnel in the barracks that were not using the issued secure lockbox for prescription medications though none were controlled medications. Individual rooms in the WT barracks have the new oversized refrigerator and the Department of Public Works (DPW) is projected to refit these new refrigerators in FY 10. Most WT personnel in the barracks and housing units were pleased with the unit/housing repair process and response to their work orders.

c. Recommendations: WTB command continue to reach out or maintain its guidance seeking with Safety, Installation Command (IMCOM), DPW or Housing Office to assess and correct the missing fire sprinkler head metal rings, the inoperable or damaged smoke detectors and other deficiencies. The WTB leadership (e.g., squad leaders, first sergeants) reinforce the responsibilities to WT personnel by incorporating in their periodic weekly inspections and in their barracks in- and out-processing checklists in order to strengthen the cleanliness, maintenance and fire safety standards. WTB's enforcement of inspection standards, based on the lessons learned from the previous semi-annual WT inspections, clearly demonstrated a solid response in identifying and correcting the deficiencies. The WTB command is directed to reply to the Inspector General findings and observations within 60 days (NLT 27 Nov 09).

Chapter 1 - Objectives and Methodology

1. Objectives.

a. Assess compliance with WT housing assignments as outlined in Memorandum, DEPSECDEF, 18 Sep 07, Subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel.

b. Assess WT occupied housing for compliance with baseline standards as outlined in Memorandum, DEPSECDEF, 18 Sep 07, Subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel.

c. Assess compliance with the requirement to provide special accommodations and services to WT with functional limitations as outlined in Memorandum, DEPSECDEF, 18 Sep 07, Subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel.

2. Inspection Team. The inspection team consisted of the PRMC Command IG, three PRMC Assistant IGs and the PRMC Safety Officer. Two Assistant IGs from 8th TSC accompanied the inspection team to facilitate open communications with the Senior Commander, IMCOM-PAC, US Army Garrison-HI (USAG-HI), and DPW.

3. Methodology.

a. Observation. The PRMC inspection team coordinated with the Senior Commander, USAG-HI, WTB Commander and other pertinent staff members (e.g., S-4/Logistics, 8th TSC IG). The team visited a total of 205 WT quarters from three different facilities (barracks, billeting, and government housing). One hundred eight (108) WT personnel reside in WT barracks, two WT reside in lodging, and 54 WT reside in government-owned or leased housing units.

b. Document Review. The inspection team conducted an on-site review of open work orders from the last WT housing inspection and other WTB standard operating instructions.

c. Interviews. The inspection team conducted direct and telephonic interviews with most WTB's personnel to include the Commander, Executive Officer, Command Sergeant Major, First Sergeants, and importantly with WT residents. The interviews were focused specifically to gain feedback on work order response and overall housing satisfaction and to identify special accommodations and services for those WT with functional limitations.

d. Surveys. WT personnel residing in the barracks, in lodging, and in government-owned or leased housing units were surveyed for overall satisfaction, such as the general condition and work order response on their quarters. Seven WT personnel were not present during this inspection but most were able to respond telephonically with the survey. The 56 WT personnel surveyed that were residing in family housing and in lodging revealed an overall satisfaction with a *Mode* of 10 and a *Mean* of 8 (in a scale of 1 to 10 with 10 as the highest customer satisfaction).

4. Locations Visited. The inspection team visited the following facilities to determine compliance with DEPSECDEF Memorandum of 18 September 2007:

Housing Location

- (1) Aliamanu Military Reservation
- (2) Helemano Military Reservation
- (3) Navy Lodging and Housing Units (Manana Housing)
- (4) Schofield Barracks and Housing Units
- (5) Tripler Housing and Fisher House
- (6) Wheeler Army Air Field

5. Finding/Observation Format.

a. Where a violation of a published standard, policy, law or regulation existed, a Finding Statement was developed and is addressed in the following format:


- Finding statement
- Standard(s)
- Root Cause
- Discussion
- Recommendation

b. Where there was no violation of a published standard, policy, law or regulation, but an observation was made to improve current operations, an Observation Statement was developed and is addressed in the following format:

- Observation statement
- Standard(s), if applicable
- Discussion
- Recommendation

6. In the report, quantitative terms, such as “few, some, majority, and most” are used to describe percentile ranges of quarters/barracks rooms inspected linked to specific findings or observations. These terms are defined as follows:

Few	1-25%
Some	26-50%
Majority	51-75%
Most	76-99%
All	100%



Chapter 2 - Good News

1. Installation of individual air-condition control in each room has been completed in the WT barracks with two-hundred rooms.
2. A renovated building has been opened as an additional facility for WT personnel. The barracks' first floor is American with Disabilities Act (ADA) compliant and the building is co-located with the Warrior Assistance Center (WAC) and next to the medical treatment facility (MTF).
3. Names of WT Soldiers living in the barracks were posted on outside of each assigned room for immediate identification.
4. Active participation, direct involvement and collaborative efforts were commendable for the WTB leadership in reaching out for support and advice with other WT personnel and agencies (e.g., First Sergeants, Squad Leaders, IMCOM, DPW, Housing Office) thereby enhancing the cleanliness and in maintaining the safety/other standards in WT barracks and housing facilities.

Chapter 3 - Findings and Observations

Objective 1: Assess compliance with WT housing assignments as outlined in Memorandum, DEPSECDEF, 18 Sep 07, Subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel.

Observation 1.1: There were no findings relating to housing assignments in WT barracks, in government-owned/leased housing units or lodging, and in privatized lodging units across the island of Oahu.

Discussion: Every WT occupant in the barracks, in housing unit or in lodging facility along with those with dependents was appropriately housed based on WT's pay grade and medical condition. One WT personnel has seven dependents but opted to stay in the new Navy housing unit with three bedrooms. Both WT barracks provided excellent and adequate housing conditions for WT occupants. Most WT personnel were residing in new government-owned/leased housing units; one WT resides in the Navy lodging and another WT resides in Tripler Fisher House. All the facilities met the assignment standards and provided adequate services and amenities for all WT occupants as outlined in DEPSECDEF 18 Sep 07 memorandum.

Recommendation: WTB command maintain the standard and the effective and appropriate assignment of room or housing unit to every WT personnel.

Objective 2: Assess WT occupied housing for compliance with baseline standards as outlined in Memorandum, DEPSECDEF, 18 Sep 07, Subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel.

Finding 2.1: The servicing laundry facility and three vacant rooms in one of the barracks had missing fire sprinkler head metal rings (escutcheons).

Standards: National Fire Protection Association (NFPA) 13-28, *Installation of Sprinkler Systems*, 2007 edition, Chapter 6, paragraph 6.2.7.2 states "Escutcheons used with recessed, flush-type, or concealed sprinklers shall be part of a listed sprinkler assembly." DoD, Unified Facilities Criteria (UFC) 3-600-01, 26 Sep 06, *Fire Protection Engineering for Facilities*, paragraph 1-3.1, states "Existing facilities must meet the requirement of NFPA 101, *Life Safety Code*, for existing occupancies."

Root Cause: Recently completed renovation in the laundry facility and the air-conditioning work orders in one of the barracks did not include satisfactory installation of the fire sprinkler head metal rings. DPW did not identify the missing fire sprinkler head metal rings in both the laundry and in the barracks.

Discussion: DPW personnel, the Building Manager and WTB personnel should enforce the standards and responsibilities in ensuring the servicing laundry facility meet all the fire safety standards. This is a shared laundry facility which provides service to WT personnel and to other outlying personnel in other barracks. The Building Manager responsible in overseeing the

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maintenance reporting of the laundry facility should periodically check, assess or promptly report missing sprinkler head metal rings to DPW. The fire sprinkler head metal rings provide consistency in the sprinklers' water spray pattern.

Recommendations:

- a. Garrison, DPW, IMCOM and WTB personnel should ensure that the standards in the proper care, maintenance and reporting of missing sprinkler head metal rings are being met.
- b. Building Manager or other responsible personnel conduct periodic check and prompt reporting of deficiencies within the laundry facility. WTB correct the finding and report to PRMC IG in 60 days from the date of out-brief.

Finding 2.2: Few rooms or 2.5% out of 200 rooms in one of the barracks had missing, faulty or malfunctioned fire alarm detectors (most of these rooms were vacant). **This is a similar finding since the last three inspections.**

Standards: NFPA 72-92, *National Fire Alarm Code*, 2007 edition, Chapter 10, paragraph 10.2.2.1 states that "The property or building owner or the owner's designated representative shall be responsible for inspection, testing, and maintenance of the system and for alterations or additions to this system." Additionally, DoD UFC 3-600-01, paragraph 1-3.1, states "Existing facilities must meet the requirement of NFPA 101, *Life Safety Code*, for existing occupancies."

Root Cause: Resident WT personnel, squad leaders or the Barracks Staff Duty personnel failed to identify, report, and submit work orders on defective or inoperable smoke alarm detectors.

Discussion: WT personnel, squad leaders, first sergeants and other responsible officials should consistently enforce the standards and responsibilities to WT personnel in the proper maintenance and prompt reporting of inoperable smoke alarm detectors to DPW for repair or replacement.

Recommendations:

- a. WTB command reinforce the barracks safety and fire safety standards to include in their WT newcomers orientation or welcome briefing.
- b. Squad leaders or first sergeants incorporate in their weekly inspection and in their barracks in- and out-processing checklists the standards and prompt reporting and follow-up of defective or faulty smoke alarms. WTB correct the finding and report to PRMC IG in 60 days from the date of out-brief.

Finding 2.3: One room in the barracks and a few (three) family housing units have broken or missing entry light switch or electrical receptacle face plate.

Standards: The 29 Code of Federal Regulation, Chapter 17 (7-1-04 Edition) paragraph 1910.303 states that "(b) Examination, installation, and use of equipment-(1) Examination.

[REDACTED]

Electrical equipment shall be free from recognized hazards that are likely to cause death or serious physical harm to employees.” Additionally, DoD UFC 3-600-01, paragraph 1-3.1, states “Existing facilities must meet the requirement of NFPA 101, *Life Safety Code*, for existing occupancies.”

Root Cause: Resident WT personnel failed to identify the electrical hazard within their unit.

Discussion: Resident WT personnel should consistently enforce the standards and responsibilities in the proper maintenance and reporting of inoperable electrical switch or broken receptacle face plates.

Recommendation: Resident WT personnel remain cognizant with electrical hazard within their unit and promptly submit a work order for repair. WTB correct the finding and report to PRMC IG in 60 days from the date of out-brief.

Observation 2.1: The overall condition of the barracks and housing units were good.

Discussion: Most rooms in the barracks were clean, neat and tidy. Observations indicated that WT personnel, particularly the squad leaders were enforcing the maintenance and housekeeping standards. Few rooms in the barracks need some minor repairs or cleaning such as broken cabinet doors, broken door bell knob, faulty automatic door hinges, leaky tub faucet, burned-out lights, cracked toilet seat and dusty air vents. The downspout located outside the barracks was blocked with leaves and mold growing out of the drain pipe and a hand wheel is missing on the stairwell fire standpipe in one of the barracks. Overgrown hedges in one of the barracks covered the Fire Department standpipe connections in both end of the stairwells. One unit has broken screens and missing pieces of window panes in the laundry area. Few homes have tall grass in the backyard and one home with some tree debris on the roof top.

Recommendations:

a. WTB personnel continue to enforce the standards and prompt reporting based on the barracks check-in and check-out checklists to enhance accountability, proper maintenance and housekeeping standards, IAW AR 420-1, *Army Facilities Management*.

b. WTB command ensure all the minor deficiencies in the barracks and in housing units have been corrected and a follow-up is in place on work orders.

c. WTB Staff Duty personnel or squad leaders should ensure timely submission and follow-up of work orders.

Observation 2.2: The laundry facilities in the barracks; one facility has five damaged and disconnected dryer vent hoses and another facility has a damaged dryer vent hose.

Discussion: The Building Manager should periodically check the laundry facilities and ensure all the equipment is fully operational and clean to include repair or replacement of inoperable

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dryer equipment/hoses; replacement of burned-out lights; and the cleaning of dead bugs in all of the light fixtures.

Recommendations:

a. WTB personnel continue to enforce the standards and report deficiencies in the laundry facilities to the Building Manager, WTB Staff Duty personnel or other responsible personnel.

b. Have DPW or Fire Department check if a fire extinguisher is required inside one of the laundry facilities.

Observation 2.3: The renovated barracks did not have the “Fire Extinguisher” signs posted on top of all fire extinguishers.

Discussion: The Building Manager or the Staff Duty personnel should submit a work order for the “Fire Extinguisher” signs.

Recommendation: WTB personnel or the Building Manager should capitalize the warranty covered under this newly renovated barracks for a work order on the “Fire Extinguisher” signs.

Observation 2.4: Few rooms had prescription medications that could have been stored more securely though none were controlled medications (noted during the last three inspections).

Discussion: Three WT personnel were not using their issued medication lockboxes in storing their medications. WTB has the new revised Standard Operating Procedure (SOP dated Oct 09) which include the proper security of all types of medications (including over-the-counter medications) by using the issued lock box.

Recommendations:

a. WTB remain vigilant and effectively implement the revised WTB command’s SOP in the proper storage of controlled and other medications in the barracks.

b. WTB Staff Duty personnel assigned in one of the barracks should promptly dispose of excess medications IAW with the WTB SOP.

Observation 2.5: Each room in the barracks has the new oversized refrigerator which does not fit the existing refrigerator space layout.

Discussion: This issue has been previously identified and discussed during the last WT inspections with the USAG-HI, DPW, Housing Office and WTB. The work order to modify the existing space layout is projected to commence in the beginning of FY 10 in order to refit the new refrigerators in each existing room.

[REDACTED]

Recommendation: Garrison, DPW, IMCOM and WTB coordinate and proceed with their planned project to modify the existing space layout to fit the new refrigerators.

Observation 2.6: Most WT personnel are residing in the new housing units.

Discussion: There were no major safety or fire safety issues in most of the housing units. Most WT personnel were pleased with the condition and the amenities in their new housing unit.

Recommendation: WTB leadership continue to encourage WT residents in promptly submitting repair work orders on their unit and the proper upkeep of their unit.

Objective 3: Assess compliance with the requirement to provide special accommodations and services to Warriors in Transition with functional limitations as outlined in Memorandum, Deputy Secretary of Defense, 18 Sep 07, subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel.

Observation 3.1: Both barracks and all government-owned or leased housing units provided the necessary and special accommodations and services (e.g., elevators, access ramps, parking spaces) for WT resident personnel.

Discussion: One WT personnel has requested transfer to another housing unit due to his medical condition and was approved by Housing Office (projected to move to new unit within 10 days of this inspection). Another Soldier requested a transfer to another housing unit to avoid constant noise from the Schofield firing range (WT is in the process of submitting request to Housing Office). Most rooms in WT barracks and government-owned or leased housing/ lodging units met most of the special accommodations and services for WT occupants as outlined in DEPSECDEF 18 Sep 07 memorandum.

Recommendation: WTB command assists WT personnel with their transfer or transition to new housing unit or location commensurate to his/her medical condition.

Observation 3.2: The newly renovated barracks is co-located with the Warrior Assistance Center (WAC) and is located across the medical treatment facility (MTF) which provides quick treatment accessibility for some high risk WT personnel.

Discussion: The WAC provides convenience, comfort and some functional spaces for WT personnel such as: lounge/seating areas, large television sets, an entertainment center, Internet Café's, child play areas, quiet rooms, showers (handicap/ADA compliant), multiple offices, five counseling rooms and food friendly break areas. No additional special accommodations or services are required in the barracks and in most housing units.

Recommendation: Capitalize the existing warranty in fixing or correcting the majority of the deficiencies within this newly renovated barracks.

Special Interest Item. None.

[REDACTED]

Appendix A – Directive



REPLY TO
ATTENTION OF

DEPARTMENT OF THE ARMY
HEADQUARTERS, TRIPLER ARMY MEDICAL CENTER
1 JARRETT WHITE ROAD
TRIPLER AMC, HAWAII 96859-5000

MCHK-CG

28 August 2009

MEMORANDUM FOR The Inspector General, Pacific Regional Medical Command

SUBJECT: Directive for Special Inspection of Armed Forces Housing Facilities of Warriors in Transition, 26-30 October 2009, IAW National Defense Authorization Act 2008, Public Law 110-181, Section 1662 dated 28 January 2008

1. You are directed to evaluate the effectiveness of the Armed Forces Housing Facilities of Warriors in Transition in the Pacific Regional Medical Command at Schofield Barracks, Hawaii.
2. Submit your report to me as soon as possible, but protect the rights of all persons involved and ensure the inspection is complete and accurate.



[REDACTED]

Appendix B - Detailed Standards List



DEPUTY SECRETARY OF DEFENSE
1010 DEFENSE PENTAGON
WASHINGTON, DC 20301-1010

SEP 18 2007

SA

MEMORANDUM FOR SECRETARIES OF THE MILITARY DEPARTMENTS ✓
UNDER SECRETARY OF DEFENSE FOR PERSONNEL
AND READINESS
UNDER SECRETARY OF DEFENSE FOR
ACQUISITION, TECHNOLOGY AND LOGISTICS
ASSISTANT SECRETARY OF DEFENSE FOR HEALTH
AFFAIRS

SUBJECT: DoD Housing Inspection Standards for Medical Hold and Holdover
Personnel

The Wounded, Ill and Injured Senior Oversight Committee (WII-SOC), a joint DoD/DVA committee, met and approved the following policy changes on August 28, 2007.

Effective immediately, the Military Services will provide housing for medical hold and holdover personnel in accordance with the attached standards. These standards address baseline accommodations and special features and services that may be required depending on a member's medical condition and treatment plan.

The Secretaries of the Military Departments are directed to use these standards for conducting the inspections required by section 3307 of the U.S. Troop Readiness, Veterans' Care, Katrina Recovery, and Iraq Accountability Appropriations Act, 2007 (Public Law 110-28), and to report inspection findings to the Under Secretary of Defense for Personnel and Readiness not later than October 31, 2007.

Timely implementation of these standards is a top Department priority.



Attachment:
As stated

70912971



[REDACTED]

HOUSING INSPECTION STANDARDS FOR MEDICAL HOLD AND HOLDOVER PERSONNEL

1. PURPOSE

These standards shall be used as a basis for evaluating the adequacy of facilities that house medical hold and holdover personnel.

2. GENERAL

In general, medical hold and holdover personnel receiving outpatient medical treatment (hereafter referred to as MH personnel or MH members) shall be assigned or referred to housing that exceeds or meets the applicable quality standards and is appropriate for their medical condition, expected duration of treatment, dependency status (including authorization of a non-medical attendant), and pay grade. The particular housing and associated amenities/services provided shall be an integral part of their medical treatment plan as determined by the primary care physician, patient, and chain of command. Note that some MH personnel with serious medical conditions are authorized non-medical attendants at the discretion of their primary care physician to assist in their recovery and rehabilitation. Non-medical attendants can include the member's parent, guardian, or another adult (18 or over).


3. APPLICABILITY

These standards address baseline accommodations, and any special medically needed facility features and services. Standards and guidance are also provided for associated furnishings, amenities, operations/services, and maintenance that are critical to well being and morale.

These standards apply to the following types of housing when occupied by MH personnel:

- DoD-owned family housing (FH)
- DoD-owned unaccompanied personnel housing (UPH)
- Lodging owned by DoD, whether supported by appropriated funds or a non-appropriated funded instrumentality (NAFI). Lodging types include temporary duty (TDY) lodging, permanent change of station (PCS) lodging, recreational lodging, and military treatment facilities (MTF) lodging, e.g., Fisher Houses.
- Lease/contracted housing and lodging, to the maximum extent permitted by the associated agreement.
- Privatized housing and lodging, to the maximum extent permitted by the associated agreement.

Note these standards do not apply to a service member's privately-owned home, or a rented home in the community (not privatized) that a service member obtains on his or her own.



4. PRIORITY FOR SERIOUS MEDICAL CONDITIONS AS A DIRECT RESULT OF ARMED CONFLICT

It is fitting that medical hold personnel who have "serious physical disabilities"¹ or that are the "direct result of armed conflict"² have *priority* for housing and certain services. While the minimum housing *standards* are the same for all medical hold personnel, DoD has a special obligation to provide the best for seriously Wounded Warriors. Examples where priority should be considered include: housing waiting lists, furnishings and electronic equipment, parking spaces, time to respond to maintenance requests, etc. Furthermore, the housing status of these seriously Wounded Warriors should be monitored at the Service HQ level.

5. RESPONSIBILITIES

The chain of command shall be responsible, in consultation with the patient and the patient's medical support team and case managers, to validate that every MH member is adequately housed in accordance with these standards. Before a MH member is assigned/referred to housing (e.g., before transitioning from inpatient to outpatient status), the case manager shall provide consultation to the chain of command to ensure that the intended patient housing meets any special medical needs. If an assigned/referred housing unit for a member does not meet all the applicable standards in this document, the installation or garrison commander shall document the reasons why the standards were not met (authority can be delegated), and the respective Military Service headquarters must be notified no later than one week after the MH member takes occupancy.

¹ For purposes of this provision, "serious physical disability" means: (a) any physiological disorder or condition or anatomical loss affecting one or more body systems which has lasted, or with reasonable certainty is expected to last, for a minimum period of 12 contiguous months, and which precludes the person with the disorder, condition or anatomical loss from unaided performance of at least one of the following major life activities: breathing, cognition, hearing, seeing, and age appropriate ability essential to bathing, dressing, eating, grooming, speaking, stair use, toilet use, transferring, and walking; or (b) serious psychological disabilities, such as post-traumatic stress disorder. (This definition is based primarily on 32 C.F.R. 199.2, the regulations for the CHAMPUS/TRICARE program.)

² For purposes of this provision, "direct result of armed conflict" means there was a definite causal relationship between the armed conflict and the resulting unfitting disability. The fact that a member may have incurred a disability during a period of war or in an area of armed conflict, or while participating in combat operations is not sufficient to support this finding. Armed conflict includes a war, expedition, occupation of an area or territory, battle, skirmish, raid, invasion, rebellion, insurrection, guerrilla action, riot, or any other action in which Service members are engaged with a hostile or belligerent nation, faction, force, or terrorists. Armed conflict may also include such situations as incidents involving a member while interned as a prisoner of war or while detained against his or her will in custody of a hostile or belligerent force or while escaping or attempting to escape from such confinement, prisoner of war, or detained status. (This definition is based on DoDI 1332.38, Physical Disability Evaluation, paragraphs E3.P5.2.2.1 and E3.P5.1.2.)

6. ASSIGNMENT

As a general rule, unless dictated otherwise by special medical requirements, MH personnel shall be assigned/referred to housing that exceeds or meets the applicable quality standards and that: (a) is appropriate for their expected duration of their treatment, (b) supports a non-medical attendant, if authorized, (c) supports accompaniment by their dependents when desired and not incompatible with their treatment, and (d) is appropriate for their pay grade (e.g., configuration and size). Note that from a housing assignment/referral perspective, an authorized non-medical attendant shall be treated like a dependant, e.g., if no other acceptable accommodations are available, a single MH member with an authorized non-medical attendant shall be eligible for temporary assignment to family housing.

For example, MH personnel (whether single or married) with an authorized non-medical attendant and facing a long rehabilitation period should not be housed in a one-room lodging unit, but instead be provided with a lodging unit with a minimum of two bedrooms with a kitchen and living room (e.g., PCS lodging), or family housing (DoD-owned or privatized). When eligible for DoD-owned housing, MH personnel shall be included as part of "Priority 1", as defined by DoDD 4165.63M, DoD Housing Management Manual. This referral priority should also apply to privatized or long-term leased (e.g., section 801) housing or lodging provided the referral is consistent with the privatized project's operating agreement

If appropriate housing is not available on the installation on which the member is receiving care, or at nearby military installations, and the service member does not reside in a privately-owned or rented home, MH personnel should be housed off the installation in private sector accommodations that are appropriate for their expected duration of treatment, dependency status (at their treatment location), and pay grade - unless dictated otherwise by special medical requirements.

7. BASELINE STANDARDS

Condition

All MH personnel housing must be in good overall condition with no major problems with any of the building systems, i.e., all are working properly and not at risk of imminent failure or malfunction. Building systems include but are not limited to roof, exterior walls, foundation, doors and windows, interior finishes, plumbing, lighting, electrical, life and fire safety, and heating-ventilating-and air-conditioning (HVAC). It is important that MH personnel be able to adequately control the temperature in their housing units. There shall be no mold, exposed lead-based paint, unsealed asbestos, inadequate air circulation, or any other environmental/safety/health hazard.

Kitchens

Kitchens are an important quality of life feature for MH personnel who face long rehabilitation periods, especially those with authorized non-medical attendants. Accordingly, kitchens shall be provided that exceed or meet existing applicable standards for the type of accommodations provided (unaccompanied housing, lodging, or family housing).



Laundry Facilities

Laundry facilities shall be provided as defined by the type of housing (unaccompanied personnel housing, lodging, or family housing), or as applicable based on medical condition. If an assigned/referred housing unit only has laundry equipment hook-ups, a residential-quality clothes washer and a dryer should be provided as loaned furnishings.

Furnishings

Provide loaned furnishings as appropriate.

Electronic Equipment

Generally, a television with cable/satellite service, internet service, and a telephone with local service shall be provided in each MH member's housing unit. If a MH member is unable to bring their personal electronic equipment to their assigned/referred housing, and they face a long rehabilitation period, efforts should be made to provide additional electronic devices such as a VCR/DVD player, stereo, computer with printer, and video game player. If the internet service is hard-wired, consideration should also be given to providing WIFI and a laptop computer.

Housekeeping and Pest Management

MH personnel housing shall be kept free of pests and litter, and trash containers shall be emptied on an appropriate cycle.

Landscaping, Grounds Maintenance, and Parking

Parking areas, turf, and grounds shall be well-maintained, attractive and litter-free. The number of parking spaces shall be adequate to support expected occupancy. Snow and ice shall be removed promptly from walkways and parking areas to ensure safety and prevent injuries.

Physical Security

MH member accommodations shall be provided with appropriate physical security measures, including required lighting levels inside and outside (parking and walkways).

Building Maintenance and Housekeeping Requests

An effective preventative maintenance program shall be in place for MH personnel housing. Also, installations shall have a mechanism where MH personnel can request building maintenance and housekeeping services.

8. SPECIAL MEDICAL REQUIREMENTS

Many MH members will have certain medical conditions that result in various functional limitations. For these members, it is essential that special accommodations and services be provided as an integral part of their medical treatment plan as determined by the primary care physician, patient, and chain of command. Some of these limitations will be permanent, but many others will change during recovery and rehabilitation, which may eliminate the need for certain special accommodations or services.



Accessibility

For members who have accessibility requirements, accommodations must, at a minimum, comply with the most current standards issued by the Department of Defense under the Architectural Barriers Act of 1968, as amended. Note that accessibility also applies to the route and distance (e.g., walkways, ramps, parking) that a MH member must travel from their housing accommodations to reach their medical treatment center, dining facility, or other support services. For all other MH member accommodations, consideration should be given to incorporating "universal design" principles (e.g., lever type door handles in lieu of knobs).

Cognition

When required, MH member accommodations shall address the range of cognitive limitations that result from conditions such as Traumatic Brain Injury (TBI), Post Traumatic Stress Disorder (PTSD), and stroke. For example, sometimes complex geometric patterns on rugs, linens, or flooring can cause disorientation in these patients. Flooring and carpet with a subtle texture or pattern often helps with depth perception.

Visual and Auditory

Necessary features for visually and auditorily impaired MH personnel shall be provided in accordance with the DoD standards.

Burns

MH personnel recovering from serious burns or nerve/neurological injuries are very sensitive to hot water, so consideration shall be given to installing special devices to regulate the water temperature.

Other Physical Limitations

Standard accessibility guidelines generally are adequate for ambulatory impaired MH personnel except in special cases such as when they are in a wheelchair with one or both legs in an extended position. In this case, normal wheelchair clearances and turning circles may be inadequate. Even with the loss of both legs, MH personnel can be fully ambulatory with their prostheses, but still need accessible accommodations when they are in a wheelchair (such as when they have to use the bathroom at night).

For physically impaired MH personnel, bathrooms are the major source of concern. Suggestions for improvement include doors that open to the outside, additional clearance for wheelchairs, and longer hoses on shower nozzles. For MH personnel with loss of or injury to arms and hands, accommodations shall be provided with either a bidet bowl or an electrically powered 'add-on bidet' that replaces a normal toilet seat to rinse the peritoneal area.

Housekeeping

If a MH member without a non-medical attendant would have difficulty with basic housekeeping, it may be necessary to assign them to housing where these services are included with the accommodations, such as lodging, or to provide the required services for their housing unit such as by contract. Provide disposal of bio-hazard waste as required.



Laundry Services and Equipment

Special laundry service may also have to be provided for MH personnel who have a medical condition that requires their linens, towels, and clothing to be disinfected. In accessible units with a laundry, the clothes washer and dryer should be accessible from a wheelchair.

Kitchens and Food service

For certain medical conditions, a kitchen or kitchenette may be prescribed, either in the unit or located within the same building. On the other hand, there could be special dietary requirements that would be most effectively handled by a hospital or installation dining facility. Note that ranges and cook tops in accessible units shall have control knobs on the front for easy wheelchair access.

Furnishings

Accessible rooms need to have accessible furnishings, such as computer desks and higher beds.

Parking

MH personnel with mobility impairments shall have first priority in assignment and use of all parking spaces under the control of the facility, beginning with those spaces closest to the entrances and exits used by MH personnel. The next level of priority shall be extended to individuals who transport MH personnel with these types of disabilities. If possible, spaces shall be provided for pickup and drop-off in addition to daily and overnight use. The number of spaces shall be adequate to support the expected occupancy, including the required number of accessible spaces. Additional spaces shall be provided on an expedited basis to meet unforeseen needs.

Proximity to Outpatient Treatment Center and Other Services

MH personnel may require housing in close proximity to a medical treatment facility for reasons related to their disabilities or medical conditions. For example, there may be a substantial risk of unanticipated urgent medical situations that require prompt attention by caregivers, or the frequency and duration of routine medical treatment may dictate the need for housing nearby. Transportation must be provided for MH personnel who do not have their own means of transport (e.g., transportation by a non-medical attendant with a POV) and who are not housed adjacent to their outpatient medical treatment facilities (whether on or off the installation). This transportation must be adequate to ensure timely access to treatment, dining facilities, and other important support facilities such as exchanges and commissaries.

9. INSPECTIONS

The Military Services shall conduct periodic inspections of MH personnel housing in accordance with these standards, at least on an annual basis. Inspections of privatized housing and lodging containing MH personnel shall be accomplished only with prior coordination with the project partner or owner. In the event a deficiency is identified, the commander of such facility shall submit to the Secretary of the Military Department a detailed plan to correct the deficiency; and the commander shall reinspect such facility not less often than once every 180 days until the deficiency is corrected.



10. FEEDBACK AND UPDATES

The Military Services shall implement periodic and comprehensive follow-up programs using surveys, one-on-one interviews, focus groups, and town-hall meetings to learn how to improve MH personnel housing and related amenities/services. Such feed back should be solicited from the MH members, their families and friends, care-givers, chain of command, and housing owners/operators. Summaries of the feedback with resulting changes should be provided on a periodic basis to OSD, in conjunction with any other reporting requirements.

11. IMPLEMENTATION

The Military Departments have the authority to issue supplemental instructions to provide for unique requirements within their respective organizations provided they conform to the basic policy guidance in this document.



Appendix B - Detailed Standards List (Continued)

Army Regulation (AR) 420-1, *Army Facilities Management*, paragraph 3-19 and Figure 3-1. Under 10 USC 2775, as implemented in AR 735-5, a Soldier is liable to the United States for damage to any assigned housing and related equipment or furnishings, if the damage is caused by the Soldier's abuse or negligence. The term "assigned housing" means both family and unaccompanied personnel housing.


Code of Federal Regulation 29, Chapter 17 (7-1-04 Edition), paragraph 1910.303, *General Requirements*.

Department of Defense (DoD), Unified Facilities Criteria (UFC) 3-600-01, 26 Sep 06, *Fire Protection Engineering for Facilities*, paragraph 1-3.1, states "Existing facilities must meet the requirement of NFPA 101, *Life Safety Code*, for existing occupancies."

Memorandum, Deputy Secretary of Defense, 18 September 2007, subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel.


National Fire Protection Association (NFPA) 13-28, *Installation of Sprinkler Systems*, 2007 edition, paragraph 6.2.7.2, states, "Escutcheons used with recessed, flush-type, or concealed sprinklers shall be part of a listed sprinkler assembly."

NFPA 72-92, *National Fire Alarm Code*, 2007 edition, paragraph 10.2.2.1, states, "The property or building owner or the owner's designated representative shall be responsible for inspection, testing, and maintenance of the system and for alterations or additions to this system."



Appendix C – Acronym List

ADA	-	American with Disabilities Act
CG	-	Commanding General
DoD	-	Department of Defense
DPW	-	Department of Public Works
NFPA	-	National Fire Protection Association
PRMC	-	Pacific Regional Medical Command
RMC	-	Regional Medical Command
SC	-	Senior Commander
TAMC	-	Tripler Army Medical Center
TSC	-	Theater Sustainment Command
UFC	-	Unified Facilities Criteria
WAC	-	Warrior Assistance Center
WT	-	Warriors in Transition
WTB	-	Warrior Transition Battalion
WTU	-	Warrior Transition Unit



Appendix D – References

ALARACT 295/2008, 9 December 08, Subject: *MOD 1 to ALARACT 162/2008.*

ALARACT 162/2008, 3 July 2008, Subject: *Inspection of Armed Forces Facilities Used to House Recovering Service Members Assigned to Army Warrior Transition Units.*

Army Regulation 420-1, *Army Facilities Management*, 12 February 2008.

Code of Federal Regulation 29, Chapter 17 (7-1-04 Edition), paragraph 1910.303, *General Requirements.*

Department of Defense Unified Facilities Criteria (UFC) 3-600-01, 26 Sep 06, *Fire Protection Engineering for Facilities.*

National Defense Authorization Act (NDAA), Public Law 110-181, Sec 1662, 28 January 2008, Subject: *Access of Recovering Service Members to Adequate Outpatient Residential Facilities.*

Memorandum, Deputy Secretary of Defense, 18 September 2007, Subject: *DoD Housing Inspection Standards for Medical Hold and Holdover Personnel.*

Memorandum, Deputy Chief of Staff, G-1, HQDA, 18 June 2007, Subject: *Housing Prioritization for Warriors in Transition.*

National Fire Protection Association (NFPA) 13-28, *Installation of Sprinkler Systems*, 2007 edition.

NFPA 72-92, *National Fire Alarm Code*, 2007 edition.